

FILED

09 APR -08 PM 12:44

RICHARD S. WICKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

10 LEIGH-DAVIS GLASS,
11 Plaintiff,
12 vs.
13 ROBERT E. McFADDEN, Regional
14 Director; et al.) Defendants.

CASE NO. 08-1585

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

JSW

15
16 I, LEIGH-DAVIS GLASS, declare, under penalty of perjury that I am the
17 plaintiff in the above entitled case and that the information I offer throughout this application
18 is true and correct. I offer this application in support of my request to proceed without being
19 required to prepay the full amount of fees, costs or give security. I state that because of my
20 poverty I am unable to pay the costs of this action or give security, and that I believe that I am
21 entitled to relief.

22 In support of this application, I provide the following information:

23 1. Are you presently employed? Yes No X

24 If your answer is "yes," state both your gross and net salary or wages per month, and give the
25 name and address of your employer:

26 Gross: N/A Net: N/A

27 Employer: N/A

28

If the answer is "no," state the date of last employment and the amount of the gross and net salary and wages per month which you received. (If you are imprisoned, specify the last place of employment prior to imprisonment.)

4 I HAVE BEEN IMPRISONED SINCE 2004, AND PRIOR TO
5 THAT WAS NOT WORKING, BECAUSE I WAS IN AND OUT
6 OF JAIL (UNDER THE SAME INDICTMENT) SINCE 2002.

7 2. Have you received, within the past twelve (12) months, any money from any of the
8 following sources:

11 b. Income from stocks, bonds,
12 or royalties? Yes No

13 c. Rent payments? Yes No

14 d. Pensions, annuities, or Yes No

15 life insurance payments? Yes No V

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
20 received from each.

21 N/A

22

23 3. Are you married? Yes No
24 Spouse's Full Name: N/A

24 Spouse's Full Name: N/A
25 Spouse's Place of Employment: N/A

25 Spouse's Place of Employment: N/A
26 Spouse's Monthly Salary, Wages or Income:
27 Gross \$ N/A Net \$ N/A

28 4. a. List amount you contribute to your spouse's support: \$ N/A

1 b. List the persons other than your spouse who are dependent upon you for
2 support and indicate how much you contribute toward their support. (NOTE:
3 For minor children, list only their initials and ages. DO NOT INCLUDE
4 THEIR NAMES.).

5 | N/A

7 5 Do you own or are you buying a home?

Yes No

8 | Estimated Market Value: \$ N/A Amount of Mortgage: \$ N/A

9 6. Do you own an automobile? Yes No X

10 | Make N/A Year N/A Model N/A

11 Is it financed? Yes No If so, Total due: \$ N/A

12 Monthly Payment: \$ N/A *I HAD A CAR SEIZED BY U.S. MARSHALS,
AND THUS, I HAVE NO RIGHTS TO IT, OR THE EQUITY.

13 7. Do you have a bank account? Yes No (Do not include account numbers.)

14 Name(s) and address(es) of bank: N/A

15

16 Present balance(s): \$ N/A SCOTTRADE BROKERAGE ACCOUNT
17 Do you own any cash? Yes No Amount: \$ 9.00 THAT HAS NOT BEEN

18. Do you have any other assets? If "Yes," provide a detailed description.

18 Do you have any other assets? (If
19 market value.) Yes No

VACANT LAND, THAT SHOULD BE ASSESSED AT \$5,000. THE LAND IS
TIED UP IN LITIGATION AND I HAVE NO RIGHTS TO IT OR ITS EQUITY.
8 What are your monthly expenses?

21 8. What are your monthly expenses?

22 Rent: \$ 0 Utilities: 20 (LAUNDRY, DETERGENT, ETC.)

23 Food: \$ 20* Clothing: 10
24 Charge Accounts: NONE *I HAVE HAD TO BORROW MONEY TO PAY FOR
THE ABOVE NECESSITIES, INCLUDING OTC MEDICINES.

25 Name of Account

Monthly Payment

Total Owed on This Acct

NONE

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Notes

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N

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 YES. COURT FEES & FINES OF ABOUT \$1,000. ANOTHER
4 \$1,600, APPROXIMATELY, TO FRIENDS THAT HAVE LET ME BORROW
5 MONEY WHILE INCARCERATED.

6 10. Does the complaint which you are seeking to file raise claims that have been presented
7 in other lawsuits? Yes No X

8 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
9 which they were filed.

10 N/A

11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.

15 4-3-08

16 DATE

SIGNATURE OF APPLICANT

J.Y. Haas

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Case Number: CV 08-1585 JSW/Pax

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of LEIGH-DAVIS GLASS for the last six months FEDERAL PRISON CAMP-VICTORVILLE [prisoner name] where (s)he is confined.

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ See attached and the average balance in the prisoner's account each month for the most recent 6-month period was \$ See attached

18
19 Dated: 4/3/88


[Authorized officer of the institution]

Inmate Inquiry

Inmate Reg #: 2482112 **Current Institution:** Victorville FCI
Inmate Name: GLASS, LEIGH-DAVIS **Housing Unit:** VVM-G-N
Report Date: 04/03/2008 **Living Quarters:** G01-015L
Report Time: 3:34:31 PM

[General Information](#) | [Account Balances](#) | [Commissary History](#) | [Commissary Restrictions](#) | [Comments](#)

General Information

Administrative Hold Indicator: No
 No Power of Attorney: No
 Never Waive NSF Fee: No
 Max Allowed Deduction %: 100
 PIN: 9096
 PAC #: 879431451
 FRP Participation Status: Participating
 Arrived From: VIM
 Transferred To:
 Account Creation Date: 12/2/2003
 Local Account Activation Date: 4/23/2005 3:19:30 AM

Sort Codes:

Last Account Update: 4/1/2008 6:13:13 PM
 Account Status: Active
 Phone Balance: \$1.19

FRP Plan Information

FRP Plan Type	Expected Amount	Expected Rate
Quarterly	\$25.00	0%

Account Balances

Account Balance: \$0.00
 Pre-Release Balance: \$0.00
 Debt Encumbrance: \$0.00
 SPO Encumbrance: \$0.00
 Other Encumbrances: \$0.00
 Outstanding Negotiable Instruments: \$0.00
 Administrative Hold Balance: \$0.00
 Available Balance: \$54.36
 National 6 Months Deposits: \$507.21
 National 6 Months Withdrawals: \$492.20
 National 6 Months Avg Daily Balance: \$108.16
 Local Max. Balance - Prev. 30 Days: \$105.31
 Average Balance - Prev. 30 Days: \$105.31

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112 / 1114

Commissary History

Purchases

Validation Period Purchases: \$50.95

YTD Purchases: \$450.85

Last Sales Date: 4/1/2008 6:13:13 PM

SPO Information

SPO's this Month: 0

SPO \$ this Quarter: \$0.00

Spending Limit Info

Spending Limit Override: No

Weekly Revalidation: No

Bi-Weekly Revalidation: No

Spending Limit: \$290.00

Expenditure Spending Limit: \$40.05

Remaining Spending Limit: \$249.95

Commissary Restrictions

Spending Limit Restrictions

Restricted Spending Limit: \$0.00

Restricted Expended Amount: \$0.00

Restricted Remaining Spending Limit: \$0.00

Restriction Start Date: N/A

Restriction End Date: N/A

Item Restrictions

List Name	List Type	Start Date	End Date	Active
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Comments

Comments: